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INDICATION FORM**

<b>Application Number</b>	10/502,417-Conf. #2043
<b>Filing Date</b>	February 15, 2007
<b>First Named Inventor</b>	Bakulesh Mafatlal Khmar
<b>Title</b>	THE METHOD OF TREATING CANCER
<b>Art Unit</b>	1645
<b>Examiner Name</b>	J. E. Graser
<b>Attorney Docket No.</b>	21059/0206951-USO

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

<b>Signature</b>	<i>Bakulesh M. Khmar</i>	<b>Date</b>	28-Dec-2007
<b>Name</b>	Bakulesh Mafatlal Khmar	<b>Telephone</b>	+91-2718-225001
<b>Title and Company</b>	Inventor		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.